

been inactivated. The best culture medium was inactivated aqueous with human lens matter. Lens in blood serum is a good medium, especially for pneumococci. The significance of these findings for clinical cases with lens débris in the anterior chamber is discussed.

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BOOK NOTICES

Annual Report of the Department of Health of Palestine, 1933

Printing Office, Jerusalem. Price, with postage, 130 mils.

Palestine has the distinction of being the country where there is a greater percentage of blindness than any other in the world. This is the result of seasonal epidemics of acute conjunctivitis caused by the action of well-known bacterial organisms. Under certain conditions the inevitable background of trachoma is an adjuvant.

Palestine is richly provided with means for the relief of ocular disease as compared with other countries, though still insufficiently to cope with the vast amount which exists.

Considerable additional credits have been granted in view of the high incidence of blindness in Southern Palestine which the census of 1931 revealed.

The lines of expansion recommended by the Consulting Ophthalmic Surgeon to the Government, Dr. W. E. Thompson, were similar to those adopted for some years by the Department of Health, but with the addition of village clinics, conducted by trained hospital attendants (tamurgis), and supervised by the Medical Officers of central stationary clinics.

These village clinics have been most successful. Not only did the tamurgis see and give first aid to a very large number of patients with early acute conjunctivitis, but they also visited a selected number of villages in the vicinity and collected and treated other patients who subsequently attended at their village clinics. The frequent visits of the Medical Officer of the Central Clinic to all the village clinics permitted him to see and prescribe treatment to be carried out by the tamurgi for all new cases, or to transfer cases to his own Central Clinic.

Undoubtedly the expansion of the ophthalmic work resulted in curtailment of several epidemics of acute conjunctivitis and in the early treatment and cure of a large number of cases which would otherwise have developed impairment of vision or blindness. Even under treatment, 6.4 per cent. of the cases developed corneal ulcers.

However, this is better than in another district where there were no first aid clinics, for here ulceration of the cornea developed in 16.6 per cent. of the cases.

A mobile ophthalmic unit was ordered during the year. It will consist of a motor-lorry with specially designed interior and suspended tent attachments for doctor's and nurses' clinics, together with a trailer for the accommodation of two nurses. The inside of the lorry will provide storage for equipment of the clinic and for the office and sleeping accommodation of the doctor.

The Director of Health, Colonel Heron, in the more general sections of the Report, remarks on the shortage of water. Many of the villages depend entirely on rain water cisterns, and the majority were not filled during the preceding winter. Most of the springs in the hill country dried up in the early summer. It was common for villagers to travel from three to nine miles each way for water; under these conditions acute ophthalmias ran rife.

Strabismus. By A. CANTONNET and J. FILLIOZAT, with the collaboration of G. FOMBEURE, translated from the French by the late Dr. Max Coque, B.Sc. Pp. 379, with 83 illustrations. First edition. London: M. Wiseman & Co. 1934.

Much trouble has obviously been taken in the preparation of this book on squint. The subject matter is divided into three sections.

Part I deals with the physiology of vision in which the authors assemble old theories and add their own views to them. They introduce such instruments as Cantonnet's Test for Binocular Vision, Remy's Separator and Diploscope, and others. As diagnostic instruments, these are more or less comparable to Maddox Wing and Rod Test, Bishop Harman's Binocular Test, and Worth's Amblyoscope; as training instruments, they supply a variation and supplement to the instruments in everyday use.

Part II deals with the pathology of binocular vision and attempts to correlate the cases of binocular instability with cases of manifest strabismus, and later deals with the relationship of the squinting eye to the directing eye.

Part III sets forth the considerations and methods of the re-education of squinters. The authors find that 70 per cent. of cases react to orthoptic treatment alone without surgical measures and that it is possible to deal with cases up to 35 or 40 years of age. Their method is directed to the usual aim of the development of the fusion faculty and to the breaking down of the suppression in the affected eye.

Unfortunately a translation adds difficulty to the reading and the text tends to be complicated by unnecessary similes and reiterations. The authors, however, bring much enthusiasm to their subject.

A Handbook of Ophthalmology. By HUMPHREY NEAME and F. A. WILLIAMSON-NOBLE. Second edition. Pp. 323. Illustrations. Twelve coloured plates, containing 46 coloured illustrations, and 147 text figures. London: J. and A. Churchill. 1935. Price, 12/6.

This book is written for undergraduate students and general practitioners and presents to them in a succinct and lucid manner the essentials of ophthalmology. It contains many points of practical interest and value. Those diseases which form the bulk of out-patient practice and the commoner ocular conditions found among medical in-patients are described, rarities receiving only brief mention.

The technique of the usual methods of examination is carefully described. The subject matter is attractively written and reads easily. The illustrations, many of which are coloured plates, are good. It is remarkable that so many of these have been incorporated in a text-book at such a modest price.

Reference is made to recent work in the surgical treatment of retinal detachment by the various diathermy methods and to the effect of an "H" substance in the experimental production of acute glaucoma. Greeves' operation for ptosis has received note, and tuberculin and T. A. B. as a method of modified protein-shock therapy are discussed. The effects and value of local and general ultra-violet radiation are mentioned in several sections.

There is an additional chapter on tropical ophthalmology written by Major H. Williamson, I.M.S. This is of considerable interest and enhances the value of work, particularly for those practitioners who may find their professional field of work in tropical countries.

The index is approximately double in size compared with that of the first edition, and for this arduous task the authors express their thanks to Mr. E. F. King. The book is well produced and is an admirable handbook for the large section of the profession to whom it is addressed.

The Practice of Refraction. By SIR STEWART DUKE-ELDER. Second edition. Pp. 374, 180 illustrations. London: J. and A. Churchill. 1935. Price, 12/6.

This book presents the practice of refraction work in a clear and concise manner. It will be particularly appreciated by the post-graduate student beginning his ophthalmological studies as it is devoid of lengthy dissertations on higher mathematics and physics and is confined in the main to points of practical value.

Recent work on the incidence of refractive errors, the aetiology of myopia, the prescription of contact glasses and orthoptic training are among the topics of current interest which the author has discussed.

The book is essentially of a clinical character and theoretical matters are dealt with only to make their application to practical problems understandable.

The author submits this work as a guide to the practitioner undertaking refraction work, but comments that "the art of refraction cannot in any sense be learned by reading, but only by assiduous and painstaking practice in the clinic of a hospital, where large numbers of cases of all kinds are available, where the findings can be supervised and corroborated, and where long practice makes the interpretation of results instantaneous."

NOTES

Death

WE much regret to record the death of Dr. James Collier on February 9. For many years he was Physician to the Royal Eye Hospital, as well as to St. George's Hospital and the National Hospital, Queen Square.

The son of a medical man and the brother of the equally gifted Horace Collier, whose early retirement through ill-health was a genuine tragedy, James Collier was educated at St. Mary's Hospital and the University of London. He had a brilliant career as a student, winning scholarships and medals and early showed the bent of his mind by becoming House Physician at Queen Square. His services at St. George's Hospital were so much appreciated by his colleagues that he was elected Emeritus Lecturer on neurology in the medical school when he became Consulting Physician to the hospital after 20 years' service on the senior staff.

The writer had the good fortune to be present at Collier's first out-patient clinic after his election to St. George's and to have been his House Physician; he would like to record his admiration for Collier's kindness, single-mindedness and vivid personality.

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International Ophthalmological Council

THE International Association for the Prevention of Blindness, The International Organization in the Struggle against Trachoma. All these Councils are meeting at the Royal Society of Medicine during the forthcoming congress of the Ophthalmological Society in April.

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Ophthalmological Society of the United Kingdom. Annual Congress

THE subject for discussion is "Diseases of the blood and their ophthalmological complications," to be opened by Sir Arnold Lawson, Dr. H. L. Tidy, Prof. E. C. Dodds and Dr. P. N. Panton. In